

Assurance

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: 3070544 Cherry Hill, NJ 08034 Article Number7005 1160 0004 9460 8876Daniel A. Mac Donald

Registered Agent
Admiral Insurance Company
1255 Caldwell Road

Cherry Hill, New Jersey 08034

5. Received By: (Print Name)

Michael Herishko

6. Signature: (Addressee or Agent)

XMichael Herishko

4b. Service Type

Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Receipt Service.